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CONFIRMATION NO. 9231

<b>SERIAL NUMBER</b> 10/626,830	<b>FILING OR 371(c) DATE</b> 07/24/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1634	<b>ATTORNEY DOCKET NO.</b> NWestern-08309
<b>APPLICANTS</b> John Ernest Sims, Seattle, WA; Dixon B. Kaufman, Chicago, IL;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/398,986 07/25/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/07/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 5
Examiner's Signature _____ Initials _____				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> DAVID A. CASIMIR MEDLEN & CARROLL, LLP 101 HOWARD STREET SUITE 350 SAN FRANCISCO , CA 94105				
<b>TITLE</b> Il-1 genotype in early kidney allograft rejection				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	